

ADULT BADMINTON

Spring 2023

Bring your own racquet, shuttlecock and enjoy a friendly game with your neighbors. The program will consist of informal pick up games.

ELIGIBILITY: Residents of the Village of Briarcliff Manor (VBM) and the Briarcliff Manor School District (BMSD) who are 18 years of age & older. Non-residents (NONR) are welcome for an additional fee.

LOCATION: Briarcliff Todd School Gym, 45 Ingham Rd

DAY/TIME: Monday evenings - 7:00 – 9:00 PM

DATES: March 27th April 10, 17, 24 May 1, 8, 15, 22 (no April 3rd)

FEES: \$30 VBM/BMSD \$40 – NONR
\$10 drop in (check or cash - exact amount)



REGISTRATION: Registration begins **Monday, March 20th at 9am.** Registration may be done online* from any device, in person (at the Recreation Office, 3 Library Rd) or by using the drop box outside the WJV Community Center, 3 Library Road. On-site registration accepted for this program. In person and online registration will occur simultaneously. The drop box will be processed with the days' mail. *In order to register online you must create an account for your household through our Registration software, CivicRec.

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NAME: _____ DOB: _____ CELL PHONE: _____

ADDRESS: _____ ZIP _____

E MAIL ADDRESS: _____

Please PRINT NEATLY. We will use email addresses to contact you if program needs to be cancelled due to weather or the like.

The undersigned hereby recognizes that there are inherent risks involved with participation in this program and agrees to release and hold harmless the Village of Briarcliff Manor, The Briarcliff Manor School District, its employees and volunteers, of any liability whatsoever in connection with any damages and/or injuries that the above named person may sustain as a result of participation.

Signature

Date

METHOD OF PAYMENT: ☐ CASH ☐ CHECK # _____

☐ Credit Card** (additional 3% fee)

Checks payable to: **Village of Briarcliff Manor** (\$20 fee for returned checks).

**** Credit Card information below is shredded after processing.**

DATE: _____ AMOUNT: _____ RECEIPT#: _____

Credit Card #: _____ Exp. Date: _____ Cardholder Signature: _____